

WELL LOG AND DRILLING REPORTTYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARDOhio Department of Natural Resources
Division of Water, 2045 Morse Road

Columbus, Ohio 43229-6605 Voice (614) 265-6740 Fax (614) 265-6767

1009550

WELL LOCATION**CONSTRUCTION DETAILS**County HOLMES Township CLARKOwner/Builder PAUL M. MILLER
(Circle One or Both) First LastAddress of Well Location 3801 T.R. 162
Number Street NameCity SUGAR CREEK Zip Code +4 44681Permit No. AG 02-08 Section/Lot No. _____
(Circle One or Both)

Location of Well in State Plane coordinates, if available:

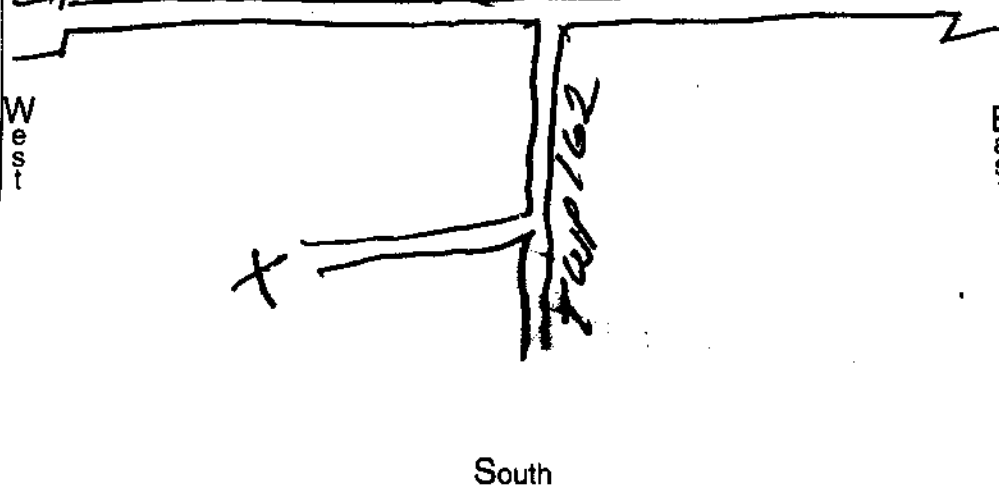
Use of Well _____

N ☐ X _____ +/- _____ ft. or mS ☐ Y _____ +/- _____ ft. or m

Elevation of Well _____ +/- _____ ft. or m

Datum Plain: ☐ NAD27 ☐ NAD83 Elevation Source _____Source of Coordinates: ☐ GPS ☐ Survey ☐ Other _____

Sketch a map showing distance well lies from numbered state highways, street intersections, county roads, buildings or other notable landmarks. If latitude and longitude are available please include here: Lat: _____ Long: _____

N 40° 30.538
W 089° 43.400WALNUT CREEKST RT 39SUGAR CREEK**WELL TEST***Pre-Pumping Static Level 70 ft. Date 10-3-08Measured from: ☐ Top of Casing ☒ Ground Level ☐ Other _____☐ Air ☒ Bailing ☐ Pumping* ☐ Other _____Test Rate 10 gpm Duration of Test 2 hrs.Feet of Drawdown 15 ft. Sustainable Yield 10 gpm

*(Attach a copy of the pumping test record, per section 1521.05, ORC)

Is Copy Attached? ☐ Yes ☐ No Flowing Well? ☐ Yes ☐ NoQuality P.H. 8.5 O.H.A.P.N.E.S.S 1.5 / MON**PUMP/PITLESS**

Type of pump _____ Capacity _____ gpm

Pump set at _____ ft. Pitless Type _____

Pump installed by _____

I hereby certify the information given is accurate and correct to the best of my knowledge.

Drilling Firm WILLIAM FAITAddress 4105 1304 SCOUT RD.City, State, Zip DOVER OH 44622Signed William FaitDate 10-31-08ODH Registration Number 02395☐ Rotary ☐ Cable ☐ Augered ☐ Driven ☐ Other _____**BOREHOLE/CASING** (measured from ground surface)1 ☐ Borehole Diameter 10 inches Depth 35' ft.Casing Diameter 6 in. Length 35 ft. Thickness 330 in.2 ☐ Borehole Diameter 6 inches Depth 127 ft.

Casing Diameter _____ in. Length _____ ft. Thickness _____ in.

Casing Height Above Ground 1 1/2 ft.Type 1 ☐ Steel 1 ☐ Galv. 1 ☒ PVC 1 ☐2 ☐ 2 ☐ 2 ☐ 2 ☐ Other _____Joints 1 ☐ Threaded 1 ☐ Welded 1 ☒ Solvent 1 ☐2 ☐ 2 ☐ 2 ☐ 2 ☐ Other _____**SCREEN**

Diameter _____ Slot Size _____ Screen Length _____ ft.

Type _____ Material _____

Set Between _____ ft. and _____ ft.

GRAVEL PACK (Filter Pack)

Material/Size _____ Volume/Weight Used _____

Method of Installation _____

Depth: Placed FROM _____ ft. TO _____ ft.

GROUTMaterial SLOAN Volume/Weight Used 900#Method of Installation GRAVITYDepth: Placed FROM 0 ft. TO 35 ft.**DRILLING LOG***

INDICATE DEPTH(S) AT WHICH WATER IS ENCOUNTERED.

Show color, texture, hardness, and formation:
sandstone, shale, limestone, gravel, clay, sand, etc.

	From	To
<u>BROWN CLAY</u>	<u>0</u>	<u>10</u>
<u>GRAY SHALE</u>	<u>10</u>	<u>35</u>
<u>LIME STONE</u>	<u>35</u>	<u>36</u>
<u>GRAY CLAY</u>	<u>36</u>	<u>70</u>
<u>LIME STONE</u>	<u>70</u>	<u>72</u>
<u>COAL</u>	<u>72</u>	<u>74</u>
<u>SAND STONE</u>	<u>74</u>	<u>76</u>
<u>GRAY SHALE</u>	<u>76</u>	<u>95</u>
<u>LIME STONE</u>	<u>95</u>	<u>99</u>
<u>GRAY SHALE</u>	<u>99</u>	<u>128</u>
<u>WHITE SAND STONE</u>	<u>128</u>	<u>162</u>

*(If more space is needed to complete drilling log, use next consecutively numbered form.)

Date of Well Completion 10-3-08 Total Depth of Well 162 ft.

Completion of this form is required by section 1521.05, Ohio Revised Code - file within 30 days after completion of drilling.
 ORIGINAL COPY TO - ODNR, DIVISION OF WATER, 2045 MORSE ROAD, COLS., OHIO 43229-6605
 Blue - Customer's copy Pink - Driller's copy Green - Local Health Dept. copy